PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the

CURRENT CORRESPONDE	NCE ADDRESS (Note: Use Bi	ock i for any change of address)	Fee pap	Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
26574 SCHIFF HARD PATENT DEPAR 6600 SEARS TO		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
CHICAGO, IL 60606-6473				(Depositor's name)			
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/722,225 11/25/2003 Helmut Barfuss P03,0443 6704 TITLE OF INVENTION: METHOD AND MEDICAL DEVICE FOR THE AUTOMATIC DETERMINATION OF COORDINATES OF IMAGES OF MARKS IN A VOLUME DATASET							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DU	E DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	03/26/2008	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS]			
MOTSINGE	R, SEAN T	2624	382-173000	-	_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/122) attached. The Address form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE Siemens Aktiengesellschaft Munich, GERMANY Please check the appropriate assignee category or categories (will not be printed on the patent): 1 Schiff Hardin LLP 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3							
Issue Fee	small entity discount p	permitted)	□ A check is enclosed. □ Payment by credit card. Form PTO-2038 is attached. Electronically □ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity State	us (from status indicated SMALL ENTITY state		h Applicant is no lor	oger claiming SMAI	L ENTITY status. See 37	CFR 1 27(a)(2)	
	Publication Fee (if reg	uired) will not be accepte	d from anyone other than	· · · · · · · · · · · · · · · · · · ·		the assignee or other party in	
Authorized Signature _ Typed or printed name	Steven I	ent, /	Ill	Registration N	a nublic which is to file (a	nd by the USPTO to process)	
an application. Confidenti submitting the completed this form and/or suggestio Box 1450, Alexandria, Vi Alexandria, Virginia 2231	ality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC 3-1450.	U.S.C. 122 and 37 CFR E USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR (1.14. This collection is esy depending upon the indi e Chief Information Offic COMPLETED FORMS T	timated to take 12 n vidual case. Any cor er, U.S. Patent and O THIS ADDRESS	ninutes to complete, includ mments on the amount of Trademark Office, U.S. De . SEND TO: Commissione lisplays a valid OMB contr	ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	